AMENDMENTS

Please cancel claims 1-18 (all of the claims currently in the application) and introduce new claims 19-35, which read as follows:

19. (new) An in vitro screening process for the identification of compounds for the treatment of cerebrovascular disorders, which comprises determining the affinity of compounds for 5-HT5 receptors and reading out those 5-HT5 binding partners whose binding affinity for 5-HT5 receptors is greater than their binding affinity for 5-HT1D receptors.

20. (new) The process as claimed in claim 19, where those compounds are read out whose binding affinity for 5-HT5 receptors is greater by at least the factor 2 than their binding affinity for 5-HT1D receptors.

21. (new) The process as claimed in claim 19, where those compounds are read out whose binding affinity for 5-HT5 receptors is greater by at least the factor 5 than their binding affinity for 5-HT1D receptors.

22. (new) The process as claimed in claim 19, where those compounds are read out whose K_i value for binding to 5-HT5 receptors is also less than 10^{-8} M.

23. (new) The process as claimed in claim 19, where also at least one 5-HT5 binding partner-induced action is determined.

24. (new) The process as claimed in claim 23, where those compounds are read out whose action is agnostic.

25. (new) The process as claimed in claim 23, where the binding of GTP to G proteins,

intracellular calcium levels, the phospholipase C activity and/or the cAMP production are determined.

26. (new) The process as claimed in claim 19, where, for determining binding affinity and/or activity, the compounds are brought into contact with cellular systems having 5-HT5 receptors.

27. (new) The process as claimed in claim 26, where human glioma cell lines or h5-HT5-transfected heterologous cell lines are used.

28. (new) The process as claimed in claim 27, where h5-HT5-transfected CHO cells, h5-HT5-transfected human kidney cells, h5-HT5-transfected human kidney cells, or h5-HT5-transfected C-6 glioma cells are used.

29. (new) A method for treating cerebrovascular disorders which comprises administering to a subject in need thereof an effective amount of at least one binding partner for 5-HT5-receptors whose binding affinity for 5-HT5 receptors is greater than its binding affinity for 5-HT1D receptors.

30. (new) The method as claimed in claim 29, where the binding affinity of the binding partner for 5-HT5 receptors is greater by at least the factor 2 than its binding affinity for 5-HT1D receptors.

31. (new) The method as claimed in claim 29, where the binding affinity of the binding partner for 5-HT5 receptors is greater by at least the factor 5 than its binding affinity for 5-HT1D receptors.

32. (new) The method as claimed in claim 29, where the K_i value for binding of the

partner to 5-HT5 receptors is also less than 10^{-8} M.

33. (new) The method as claimed in claim 29, where the binding partner is a 5-HT5 agonist.

34. (new) The method as claimed in claim 29, for the treatment of migraine.

35. (new) The method as claimed in claim 34, for the acute treatment of migraine.